PART B - FEE(S) TRANSMITTAL

			- FEE(S) IRAI							,	
Complete all dise	nd this form, togetl	ner with applicable		Cor P.C	mmissioner foi). Box 1450	r Patent	-		(
JAN 1 6 20	07 📆				xandria, Virgi 1)-273-2885	inia 223	13-1450				
INSTRUCTIONS: This appropriate All further indicated intess correct	for should be used for spondence including below or directed oth	or transmitting the ISSU g the Patent, advance of erwise in Block 1, by (a	JE FEE and PUBLIC rders and notification a) specifying a new co	OTI of n	ON FEE (if requinaintenance fees we pondence address;	red). Blo vill be ma and/or (b	cks 1 through 3 iled to the curre o) indicating a s	5 shoule ent corr eparate	d be complete respondence ac "FEE ADDRI	d where idress as ESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must						
	7590 10/16/	2006		have	e its own certificate	of mailin	g or transmissio	n.		3,	
John V. Biernacki, Esq. Jones, Day, Reavis & Pogue North Point					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
901 Lakeside Ave.					Debra Pejeau (Depositor's name						
Cleveland OH 44114 01/17/2007 ZRYRLEM2 00000028 501432 10007463					Delira Exicai					(Signature)	
01 FU::1501					9	an.	10, 3	200	7	(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR	 	ATTORN	EY DOCKET NO	. C	ONFIRMATION	I NO.	
10/007,481 11/07/2001 Phat H. Tran 555255012300 3605											
TITLE OF INVENTION	I: APPARATUS AND M	ETHOD FOR AN ACCE	ELERATED THUMB	WHE	EEL ON A COMM	UNICAT	IONS DEVICE				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE	PREV. PAID ISSUI	E FEE	TOTAL FEE(S) D	UE	DATE DU	E	
nonprovisional	NO	\$1400	\$300		\$0		\$1700	\$1700 01/16/2007)7	
EXAMINER ART UNIT			CLASS-SUBCLASS	iss							
WONG, ALBERT KANG 2612			341-020000								
Y.L. T. P. L.				n the patent front page, list							
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively,						val		
"Fee Address" ind PTO/SB/47; Rev 03-0 Number is required.	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 2 REISHIG R. FACHLYGE 3 Robert C. Liang										
*		TO BE PRINTED ON	•		• •		-				
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)											
. ,		m Timiral	Uni	+ a =	laa Canad						
Research In Motion Limited Waterloo, Canada Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government											
Please check the appropr	rate assignee category or	categories (will not be p	rinted on the patent):	_	individual Co	orporation	or other private	group	entity Gov	remment	
4a. The following fee(s) are submitted: 4b. Payment of Fee(s) I ssue Fee □ A check is encl					ise first reapply at	ny previo	usly paid issue i	fee shov	wn above)		
Publication Fee (1	Payment by credit card. Form PTO-2038 is attached.										
Advance Order -	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number501432 (enclose an extra copy of this form).										
5. Change in Entity Status (from status indicated above)						(55	5255-0123	300)			
a. Applicant claim NOTE: The Issue Fee an	b. Applicant is no							r party in			
interest as shown by the	records of the United Sta	tes Patent and Trademark	Office.	iiaii t	me applicant, a regi	isicicu att	orney or agent, c	of the as	ssignee or othe		
Authorized Signature			Date	lnua	(1) 10, 2 40,511	00	7				
Typed or printed name John V. Biernacki					Registration N	۱۰	40,511	<u> </u>	· · · · · · · · · · · · · · · · · · ·	-	
an application. Confident submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 223	ntiality is governed by 35 d application form to the ions for reducing this bu /irginia 22313-1450. DC 313-1450.	FR 1.311. The informati U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the ONOT SEND FEES OR persons are required to re	1.14. This collection is depending upon the le Chief Information COMPLETED FORM	is est indiv Office IS To	timated to take 12 to vidual case. Any co er, U.S. Patent and O THIS ADDRESS	minutes to omments of Trademai S. SEND	on the amount of the complete, included the c	f time y Department for l	athering, prepa you require to nent of Comme Patents, P.O. B	inng, and complete erce. P.O.	
		·									

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE